TITLE 407 OFFICE OF THE CHILDREN'S HEALTH INSURANCE PROGRAM

Notice of Intent to Adopt a Rule

LSA Document #10-420

Under <u>IC 4-22-2-23</u>, the Office of the Children's Health Insurance Program intends to adopt a rule concerning the following:

OVERVIEW: Amends 407 IAC 1-1-11 to amend the definition of "managed care organization". Amends 407 IAC 1-2-1 to provide that the office or its contractor shall assign a member to a PMP if the member fails to select a PMP within a reasonable time. Amends 407 IAC 1-2-2 to require claims for payment of services carved out of a CHIP MCO contract to be filed within 12 months and to make various other technical changes. Amends 407 IAC 1-4-1 to apply the Medicaid reimbursement dispute resolution procedures to providers who do not have a contract with a CHIP MCO. Amends 407 IAC 1-6-2 regarding the primary care case management fee. Amends 407 IAC 2-3-1 to delete the identification of specific premium amounts per income level and, as an alternative, indicate that premium amounts will be established by the office in accordance with federal law. Amends 407 IAC 2-4-2 to make technical changes. Amends 407 IAC 3-3-2 to apply Medicaid prior authorization procedures to the CHIP program, to require publication of prior authorization policies by CHIP MCOs, and to establish other guidelines for the prior authorization procedures of CHIP MCOs. Amends 407 IAC 3-10-1 to cover nonlegend drugs in certain circumstances. Amends 407 IAC 3-10-2 to establish prior authorization procedures for brand name drugs. Amends 407 IAC 3-13-1 to remove over-the-counter drugs from the list of noncovered services. Questions and comments concerning the proposed rule may be submitted to the Small Business Regulatory Coordinator for this rule. Statutory authority: IC 12-17.6-2-11.

For purposes of <u>IC 4-22-2-28.1</u>, the Small Business Regulatory Coordinator for this rule is:

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